

Instructions for Form WH-4852

You must send a separate Form WH-4852 for each Form W-2 not received.

We will accept a copy of your Federal Form 4852 as proof of your Indiana Income Tax withheld from your wages, otherwise you will need to complete the Indiana Form WH-4852 below.

Taxpayer Information

Enter your Social Security Number, Name, Address, City, State, and Zip Code.

Enter the tax year of the missing W-2 or 1099-R form.

Employer or Payer Information

Enter Employer's or payer's ID Number (if known), Name, Address, City, State, and Zip Code.

Enter wages, compensations, and taxes withheld, or enter 1099-R information

Complete Lines A through F using the amounts from your Federal Form 4852.

Enter the period of time (month, day, year) you worked for your employer during the tax year.

How did you determine amounts of wages and withholding shown on your Federal Form 4852?

If from a pay stub, Check box; if "Other", Check box and please explain.

Attach photocopy of payroll check stub(s) or other document(s) to verify the Indiana withholding amount(s) claimed.

Please note: A refund cannot be claimed based upon estimated withholding credits.

Sign and Date Form.

For assistance call (317) 233-4016, or you may e-mail the Department at: www.in.gov/dor/contactus/email.html



Form WH-4852
State Form 48326
(R/ 01-03)

Indiana Department of Revenue

Indiana Substitute for Form W-2 or Form 1099-R

_____ Tax Year

You must send a separate Form WH-4852 for each Form W-2 not received.

We will accept your Federal Form 4852 as proof showing your Indiana Income Tax withheld from your wages.

Taxpayer Information

Social Security Number

Enter wages, compensations, and taxes withheld, or enter 1099-R information.

Name

Complete the following lines using the amounts from your Federal Form 4852.

Address

Form 4852 Line #

City/State/Zip Code

A. Wages 7 (A) a _____

B. State Tax Withheld g _____

Employer or Payer Information

Employer's or payer's ID, FID, or TID Number (if known)

Name of State _____

C. Local Tax Withheld h _____

Name

Name of Locality _____

Address

D. Gross Distribution 7 (B) 1 _____

City/State/Zip Code

E. Taxable Amount 2a _____

F. State tax withheld 5 _____

Period worked for employer during the tax year: From ____ / ____ / ____ To ____ / ____ / ____

How did you determine the amounts used on Federal Form 4852?

☐ Paycheck Stub ☐ Other explain: _____

Attach photocopy of payroll check stub (s) or other document(s) to verify the Indiana withholding amount(s) claimed.

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature _____ Date _____